## HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS (SHORT FORM)

NAME (Last, First, Middle)	STATE POSITION HELD: (Dept/Div or Board/Commission)	
Tavii Ciffan Kanishi	Hawaii State Legislature, House of Representatives	
Tsuji, Clifton Kenichi	TERM OF OFFICE (Begin/End): 11/02/04 / 11/07/06	

Check either number 1 or 2. If you check number 2, provide the relevant information.

## 1. I HAVE NO CHANGES TO REPORT SINCE MY LAST FILING

2. I HAVE THE FOLLOWING CHANGES TO REPORT SINCE MY LAST FILING.
FOR EACH ITEM, DISCLOSE ADDITIONS, DELETIONS, OR CHANGES IN INTERESTS OF FILER,
SPOUSE AND DEPENDENT CHILDREN. USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for
dependent children, and "JT" for joint interests of the spouse and filer. Use "A" for any additions in interests, "D" for any
deletions, and "C" for any other changes.

	T	
F, SP, DC, JT	<u>A, D, C</u>	ITEM # 1
F	D	Hilo Candy Company, Inc.
		58 Pookela St.
		Hilo, HI 96720
		Amount: E
		Services Rendered: Vice President, employee
F, SP, DC, JT	A, D, C	ITEM # 4
F	D	Central Pacific Bank-waikoloa mtge
Г	]	Original Amount Owed: H
		Amount Outstanding: H
		Amount Outstanding. H
F, SP, DC, JT	A, D, C	ITEM # 4
F	D	Credit Union of Hawaii-kulaloa mtge
•		Original Amount Owed: E
		Amount Outstanding: D
F, SP, DC, JT	A, D, C	ITEM # <sup>5</sup>
F	D	Hilo Candy Co., Inc., 58 Pookela St., Hilo, HI 96720
•		Title Held: vice president
		Term of Office: 2003-no end
		Annual Compensation: E
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	<u> </u>	

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F, SP, DC, JT	A, D, C	ITEM # 6
F	D	69-1035 Keana PI., #12, Waikoloa, HI 96773 TMK No.: 3-6-9-007-019 Value: I
<u>F, \$P, DC, JT</u> F	<b>A, D, C</b> D	ITEM # 6 847 Kulaloa Road, Hilo, HI 96720 TMK No.: 3-2-4-7-3 Value: E
F, SP, DC, JT	A, D, C	ITEM # 8
F	D	3-6-9-0077-019 69-1035 Keana Pl., #12, Waikoloa, HI 96773 Amount & Nature of Consideration Received: I, Cash Name of Person Furnishing The Consideration: Matsuno Enterprises, Ltd.
<u>F, SP, DC, JT</u> F	<b>A.D.C</b> C	847 Kulaloa Road, Hilo, HI 96720; TMK No.: 3-2-4-7-3 Amount & Nature of Consideration Received: E, Cash Name of Person Furnishing The Consideration: Dunn (Note: This property was sold on 6/6/2003.)
F, SP, DC, JT	A.D.C	RÉCEIVE OS JUN-1 E STATE OF HAR
F, SP, DC, JT	A, D, C	ITEM# 12.53

CERTIFICATION: I have reviewed my previous Disclosure of Financial Interests Statements filed with the Hawaii State Ethics Commission and all succeeding amendments. I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief of my currently reportable financial interests and that there have been no other changes in my reportable financial interests since my prior reports were filed. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

SIGNATURE (Note: This filling is not valid without a signature.)

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